(Re	equestor's Name)	
(Ad	ldress)	
(Ad	ldress)	
(Cit	ty/State/Zip/Phone	e #)
PICK-UP	WAIT	MAIL MAIL
(Bu	siness Entity Nar	ne)
(Document Number)		
Certified Copies	_ Certificates	s of Status
Special Instructions to Filing Officer:		

Office Use Only



800162709958

11/16/89--01049--005 **35.00

SECRE PARSEE, FLOT

Amend a 19/1/09

COVER LETTER

TO: Amendment Section Division of Corporations					
NAME OF CORPORATION: ASCMEDINSTMENTS DIC					
DOCUMENT NUMBER: <u>P090000000754</u>					
The enclosed Articles of Amendment and fee are submitted for filing.					
Please return all correspondence concerning this matter to the following:					
Angela Fraginal Name of Contact Person					
axcert Invertnents Dec					
38 Sexton Cove Rd					
Hey largy H. 33437 City/ State and Zip Code Frag Ind S O OUL Com E-mail address: (to be used for future annual report notification)					
For further information concerning this matter, please call: at (957) 3353915 Name of Contact Person at (Area Code & Daytime Telephone Number					
Enclosed is a check for the following amount made payable to the Florida Department of State:					
□\$35 Filing Fee Certificate of Status					
Mailing AddressStreet AddressAmendment SectionAmendment SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton BuildingTallahassee, FL 323142661 Executive Center CircleTallahassee, FL 32301					



FLORIDA DEPARTMENT OF STATE Division of Corporations

November 17, 2009

ANGELA ROJAS ASCENT INVESTMENTS INC 38 SEXTON COVE RD KEY LARGO, FL 33037

SUBJECT: ASCENT INVESTMENTS INC

Ref. Number: P09000022754

We have received your document for ASCENT INVESTMENTS INC and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Articles of Correction must be filed within 30 days of the file date of the document that is being corrected. As the time period for filing Articles of Correction has expired, an amendment to the articles of incorporation could be filed at this time.

We are enclosing the proper form(s) with instructions for your convenience.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6964.

Irene Albritton Regulatory Specialist II

Letter Number: 209A00035857

.

Ottochod

Articles of Amendment to Articles of Incorporation

of	•
OSMAN DAMES TREATS DEC	3
(Name of Corporation as currently filed with the Florida Dep	t. of State)
P09000022751	
(Document Number of Corporation (if known)	
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>Florida</i> mendment(s) to its Articles of Incorporation:	Profit Corporation adopts the fol
A. If amending name, enter the new name of the corporation:	
name must be distinguishable and contain the word "corporation," "com abbreviation "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or name must contain the word "chartered," "professional association," or the ab	"Co". A professional corporation
3. Enter new principal office address, if applicable: Principal office address MUST BE A STREET ADDRESS	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	
D. If amending the registered agent and/or registered office address in Flor new registered agent and/or the new registered office address: Name of New Registered Agent:	ida, enter the name of the
New Registered Office Address: (Florida street address)	,
(City)	, Florida (Zip Code)
New Registered Agent's Signature, if changing Registered Agent:	· • /

Signature of New Registered Agent, if changing

If amending the Officers and/or Directors, enter the title and name of each officer/director being removed and title, name, and address of each Officer and/or Director being added: (Attach additional sheets, if necessary)

<u>Title</u>	Name	0 -	<u>Address</u>	Type of Action
Pres	angela	Kojas	38 SOX+M	Core Romove
O	Λ . Λ		70	35037
<u>(M)</u>	Congela	magner		☐ Add Remove
TRS	manuel	Rungo	35 Sexton	M (SL Pd Add Remove
	ending or adding addition and additional sheets, if neces			•

prov	amendment provides for islons for implementing to if not applicable, indicate 1	he amendment if n		
				
				

The date of each amendment	
	(date of adoption is required)
Effective date if applicable:	
	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(<u>CHECK ONE</u>)
The amendment(s) was/wer by the shareholders was/we	e adopted by the shareholders. The number of votes cast for the amendment(s) re sufficient for approval.
	e approved by the shareholders through voting groups. The following statement for each voting group entitled to vote separately on the amendment(s):
"The number of votes	east for the amendment(s) was/were sufficient for approval
by	"
	(voting group)
The amendment(s) was/wer action was not required.	e adopted by the board of directors without shareholder action and shareholder
The amendment(s) was/wer action was not required.	e adopted by the incorporators without shareholder action and shareholder
Dated	Jugger Hagnas
Signature	Juggen Hagnas
sele	a director, president or other officer – if directors or officers have not been cted, by an incorporator – if in the hands of a receiver, trustee, or other court binted fiduciary by that fiduciary)
	Angela Fraginals (Typed or printed name of person signing)
	(Typed or printed name of person signing)
:	President
	(Title of person signing)